ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Bloomington Hospital of Orange County

City: Paoli   County: Orange   Year: **2003**

Provider Type: Critical Access

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	$0
Cardiac Intensive	0	0	0	$0
ICU Med/Surg	0	0	0	$0
ICU Neonatal	0	0	0	$0
ICU Pediatric	0	0	0	$0
Medical/Surgical	18	604	1,830	$2,059
Neonatal Intermed	0	0	0	$0
Obstetrics	6	158	281	$2,135
Pediatric	NR	36	84	NR

Psychiatric	0	0	0	$0
Rehabilitation	0	0	0	$0
Substance Abuse	0	0	0	$0
Swing Beds	NA	20	220	NR
Other Services	0	0	0	NA
Acute Subtotal	24	818	2,415	NA
Normal Newborn	6	153	283	$786

II. Outpatient Visits			
Circulatory System	3,999	Digestive System	1,277
Endocrine System	2,676	Injuries and Poison	3,691
Mental Disorder	526	Musculoskeletal	3,041
Neoplasms	1,006	Nervous	1,272
Respiratory	1,904	Urinary	1,791
Other/Unknown	5,335	Total Visits	26,508
Number of Visits to Emergency Department			9,502
Percent of Emergency Department Visits of Total Visits			35.8%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

N - Acute Renal Dialysis	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Blood Bank	N - Burn Care Unit	N - Chiropractric Service
N - Coronary Care Unit	N - Dental Services	Y - Dietetic Services
Y - Emergency Service	N - Home Care Program	N - Hospice
Y - Inpatient Surgical Services	N - Intensive Care Unit	Y - Laboratory(Clinical)
N - Laboratory(Anatomical)	N - Long Term Care Unit	N - Neonatal Nursery
N - Nuclear Medicine Services	Y - Obstetrics Services	
Y - Occupational Therapy	N - Open Heart Surgery	Y - Operating Room
Y - Optometric Service	N - Organ Bank	N - Organ Transplant
Y - Outpatient Service	Y - Outpatient Surgery Unit	Y - Pediatric Services
Y - Pharmacy	Y - Physical Therapy	Y - Postoperative Recovery
N - Psychiatric Services	Y - Radiology(Diagnostic)	N - Radiology(Therapeutic)
Y - Rehabilitation Services	N - Respiratory Services	N - Self Care Unit
N - Shock Trauma	Y - Social Services	Y - Speech Pathology

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported

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